**PROFIT** CORPORATION

DOCUMENT # P96000038368 (2)

146

**FILED** FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 Apr 16 1997 8:00am FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997

| -EMMA                               | MA HIFU<br>MA HIFU  | ena Pa                                   | ",             | (0.1  |  |  |
|-------------------------------------|---|--|----------------|---|--|--|
| Principal Plac                      | e of Business   | Mailing Address                          | <del></del>    |   |  |  |
| 1881 ECHO COURT<br>DELTONA FL 32725 |   | 1881 ECHO COURT<br>DELTONA FL 32725-7638 |                |   |  |  |
|                                     |   |  |                | ***   | 3. Date Incorporated or Qualified 3a. Date of Last Report 04/29/1996           |  |
| 2. Principal F                      | Place of Business   | 2a. Mailing Address                      |                |   | 4. FEL Number Applied For Not Applied For                                      |  |
| Suite, Apt                          | #, etc  | Suite, Apt. #, etc.                      | ·              |   | 5. Certificate of Status Desired S8.75 Additional Fee Required                 |  |
| City & Stat                         | le  | City & State                             |                |   | 6. Election Campaign Financing \$5.00 May Be                                   |  |
| 23  <br>- ¬ Zip                     | Country   | 28 Zip                                   | Countr         | y   | 8. This corporation has liability for intangible tax under s. 199.032,         |  |
| 24                                  | 25 25 9. Name and Address of Curr   | 29 ent Begistered Agent                  | 30             |   | Florida Statutes Yes No 10. Name and Address of New Registered Agent           |  |
|                                     |   | our Hodistoine When                      | 81             | Name  |  |  |
| INFANTE, EMMA  1881 ECHO COURT      |   |  |                | 82 Street Address (P.O. Box Number is Not Acceptable) |  |  |
| UEI                                 | LTONA FL 32725  |  | 8:             | <del>                                     </del>      |  |  |
| *                                   |   |  | 84             | City  | 85 Zip Code  |  |
| 11 Pursuant                         | to the provisions of Sections 607 (F  | 502 and 607 1508. Florida Statu          | iles the abor  | /e-namen  | d corporation submits this statement for the purpose of changing its registers |  |
| office or i                         | registered agent, or both, in the Sta<br>am familiar with, and accept the obl | ite of Florida. Such change was          | authorized h   | v the cor   | poration's board of directors. I hereby accept the appointment as registered   |  |
| agent: ra<br>SIGNATURE              | am anima vini, and accept the dol   | iauesa                                   | IOIIUA SIAIUII | 15.   | 2/16/95  |  |
|                                     | Significant type dice princed name of registered a                            | 74                                       |                | ent signatur  | e required when reinstating) DATE  |  |
| 12.                                 |   | NO DIRECTORS  DELETE                     | 13.            |   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                              |  |
| DIFLE<br>NAME                       | 6mma Higu<br>1881 Choc  | esa P.H Libert                           | 1,2 NAME       |   | Conna Higura PAJ Change Addit<br>1881 Ocho Court<br>Deltona, Tl. 32725         |  |
|                                     | 1001 Pohale   | ourt                                     |                | T ADDRESS   | Tracionalo court   |  |
| STREET ADORESS                      | Beltona, F.   | 2. 32725                                 | 1.3 STREE      |   | 00 etano 1 78 32725  |  |
| CHY-ST-ZIP<br>TITLE                 | secono, os  | 1. 32723<br>STAKE DELETE                 | 2.1 TITLE      |   | ☐ Change ☐ Addit   |  |
| NAVE                                | ,   | TICL                                     | 2.2 NAME       |   |  |  |
| SURFET ADDRESS                      | WA"   | 512                                      |                | T ADDRESS   |  |  |
| CHY-SI-78°                          | lo (  | •  | 2. 4 CITY      |   |  |  |
| TITLE                               |   | DFLETE                                   | 3.1 TITLE      |   | Change Addit   |  |
| NAME                                |   |  | 3.2 NAME       |   |  |  |
| STREET ADORESS                      |   |  | 3.3 STRE       | T ADDRESS   |  |  |
| Offy-ST ZiP                         | Ì   |  | 3.4. CITY      | -ST-ZIP   | A 1 A  |  |
| TITLE                               |   | DELETE                                   | 4 1 TITLE      | ·   | Change Addit   |  |
| NAME                                |   |  | 4. 2 NAM       |   | Chillin.   |  |
| \$18EEL ADDRESS                     |   |  | 4.3 STREE      | T ADDRESS   | 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1                                       |  |
| CITY-ST-ZIP                         |   |  | 4.4 CITY       | ST-ZIP  |  |  |
| TITLE                               |   | ☐ DELETE                                 | 5.1 TITLE      |   | Change Addit   |  |
| NAM:                                |   |  | 5.2 NAME       |   |  |  |
| STREET ADDRESS                      |   |  | 5.3 STRE       | T ADDRESS   |  |  |
| CITY - ST - ZiP                     |   |  | 5.4 CrTY       |   |  |  |
| THEF                                |   | DELETE                                   | 6.1 TITLE      |   | 500002146175<br>-04/17/9701026059<br>***165.00                                 |  |
| NAME                                |   |  | 6.2 NAME       |   | -04/17/9701026059  |  |
| STREET ADDRESS                      |   |  | 63 STRE        | ET ADDRESS  | ARRICE UU  |  |
|                                     |   |  |                |   |  |  |
| CITY-ST-ZIP                         |   |  | 6.4 CITY       |   | stated in Section 119 07(3)(i) Florida Statutes - Liurther certify that the    |  |

rao nersely ceruly man the mormation supplied with this initing does not quality for the exemption stated in Section 119,07(3)(j), Florida Statutes. Further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.